

**Product-Plan Data Collection**

Company Legal Name: **Aetna Life Insurance Company**  
 HIOS Issuer ID: **29497**  
 Effective Date of Rate Change(s): **1/1/2021**

State: **DE**  
 Market: **Small Group**

To add a product to Worksheet 2 - Plan Product Info, select the Add Product button or Ctrl + Shift + P.

To add a plan to Worksheet 2 - Plan Product Info, select the Add Plan button or Ctrl + Shift + L.

To validate, select the Validate button or Ctrl + Shift + I.

To finalize, select the Finalize button or Ctrl + Shift + F.

To remove a product, navigate to the corresponding Product Name/Product ID field and select the Remove Product button or Ctrl + Shift + Q.

To remove a plan, navigate to the corresponding Plan Name/Plan ID field and select the Remove Plan button or Ctrl + Shift + A.

**Product/Plan Level Calculations**

Field #	Section I: General Product and Plan Information		
1.1	Product Name		PPO
1.2	Product ID		29497DE007
1.3	Plan Name		Aetna Silver PPO
1.4	Plan ID (Standard Component ID)		29497DE0070047
1.5	Metal		Silver
1.6	AV Metal Value		0.702
1.7	Plan Category		Renewing
1.8	Plan Type		PPO
1.9	Exchange Plan?		No
1.10	Effective Date of Proposed Rates		1/1/2021
1.11	Cumulative Rate Change % (over 12 mos prior)		4.28%
1.12	Product Rate Increase %		4.27%
1.13	Submission Level Rate Increase %		4.27%

Worksheet 1 Totals		Section II: Experience Period and Current Plan Level Information	
	2.1 Plan ID (Standard Component ID)	Total	29497DE0070047
\$7,969,542	2.2 Allowed Claims	\$7,979,483	\$7,979,483
50	2.3 Reinsurance	50	50
	2.4 Member Cost Sharing	\$1,583,439	\$1,583,439
	2.5 Cost Sharing Reduction	50	50
\$6,388,076	2.6 Incurred Claims	\$6,396,044	\$6,396,044
-\$321,297	2.7 Risk Adjustment Transfer Amount	-\$321,297	-\$321,297
\$7,047,383	2.8 Premium	\$7,047,383	\$7,047,383
12,256	2.9 Experience Period Member Months	12,256	12,256
	2.10 Current Enrollment	618	618
	2.11 Current Premium PMPM	\$711.95	\$711.95
	2.12 Loss Ratio	95.09%	95.09%
	<b>Per Member Per Month</b>		
	2.13 Allowed Claims	\$651.07	\$651.07
	2.14 Reinsurance	50.00	50.00
	2.15 Member Cost Sharing	\$129.20	\$129.20
	2.16 Cost Sharing Reduction	50.00	50.00
	2.17 Incurred Claims	\$521.87	\$521.87
	2.18 Risk Adjustment Transfer Amount	-\$26.22	-\$26.22
	2.19 Premium	\$575.01	\$575.01

Section III: Plan Adjustment Factors			
3.1	Plan ID (Standard Component ID)		29497DE0070047
3.2	Market Adjusted Index Rate		5671.51
3.3	AV and Cost Sharing Design of Plan		0.7993
3.4	Provider Network Adjustment		1.0000
3.5	Benefits in Addition to EHB		1.0000
<b>Administrative Costs</b>			
3.6	Administrative Expense		9.73%
3.7	Taxes and Fees		4.65%
3.8	Profit & Risk Load		4.74%
3.9	Catastrophic Adjustment		1.0000
3.10	<b>Plan Adjusted Index Rate</b>		5663.54
3.11	Age Calibration Factor	0.6404	0.6404
3.12	Geographic Calibration Factor	1.0000	1.0000
3.13	Tobacco Calibration Factor	1.0000	1.0000
3.14	<b>Calibrated Plan Adjusted Index Rate</b>		5424.93

Section IV: Projected Plan Level Information			
4.1	Plan ID (Standard Component ID)	Total	29497DE0070047
4.2	Allowed Claims	\$5,012,277	\$5,012,277
4.3	Reinsurance	50	50
4.4	Member Cost Sharing	\$1,005,945	\$1,005,945
4.5	Cost Sharing Reduction	50	50
4.6	Incurred Claims	\$4,006,332	\$4,006,332
4.7	Risk Adjustment Transfer Amount	-\$170,573	-\$327,979
4.8	Premium	\$5,163,484	\$5,163,484
4.9	Projected Member Months	7,782	7,782
4.10	Loss Ratio	80.24%	80.24%
	<b>Per Member Per Month</b>		
4.11	Allowed Claims	\$644.09	\$644.09
4.12	Reinsurance	50.00	50.00
4.13	Member Cost Sharing	\$129.27	\$129.27
4.14	Cost Sharing Reduction	50.00	50.00
4.15	Incurred Claims	\$514.82	\$514.82
4.16	Risk Adjustment Transfer Amount	-\$21.92	-\$21.92
4.17	Premium	\$663.52	\$663.52